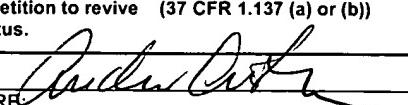


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| 89 TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371 | | ATTORNEY'S DOCKET NUMBER 36881-188775 U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 107517843 Not Yet Assigned |
| INTERNATIONAL APPLICATION NO. PCT/US2004/011903 | INTERNATIONAL FILING DATE April 16, 2004 | PRIORITY DATE CLAIMED April 16, 2003 (earliest) |
| TITLE OF INVENTION Craniofacial Implant | | |
| APPLICANT(S) FOR DO/EO/US Greg SWORDS | | |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information: | | |
| <p>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371.</p> <p>3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371 (f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2))</p> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input checked="" type="checkbox"/> has been communicated by the International Bureau (PCT/IB/308 attached). c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). <p>6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)).</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). <p>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input checked="" type="checkbox"/> have not been made and will not be made. <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)).</p> <p>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).</p> <p>10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).</p> | | |
| Items 11 to 20 below concern document(s) or information included: | | |
| <p>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input type="checkbox"/> A preliminary amendment.</p> <p>14. <input checked="" type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</p> <p>15. <input type="checkbox"/> A substitute specification.</p> <p>16. <input type="checkbox"/> A power of attorney and/or change of address letter.</p> <p>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.</p> <p>18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4).</p> <p>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</p> <p>20. <input checked="" type="checkbox"/> Other items or information: PCT/IB/304, International Search Report, and Drawings (7 sheets)</p> | | |

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| U.S. APPLICATION NO. (if known, see 37 CFR 1.5) Not Yet Assigned 107517843 | | INTERNATIONAL APPLICATION NO. PCT/US2004/011903 | | ATTORNEY'S DOCKET NUMBER 36881-188775 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------------------|---|------------------|--|--|-------------------------------------|-----------------------------|-----------------------|------|--|--|-------------------------------------|--------------------------|----------|------|----------|--|-------------------------------------|---------------------|----------|-------|-----------|--|---|--|--|------------------|---|--|--------------------------------------|--|--|--|------------------|--|
| 21. The following fees are submitted: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td><input checked="" type="checkbox"/></td> <td>a) Basic national fee</td> <td>\$300.00</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>b) Examination fee</td> <td>\$200.00</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>c) Search fee</td> <td>\$500.00</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3">TOTAL OF ABOVE CALCULATIONS =</td> <td>\$1000.00</td> <td colspan="2"></td> </tr> </table> | | | | | | <input checked="" type="checkbox"/> | a) Basic national fee | \$300.00 | | | | <input checked="" type="checkbox"/> | b) Examination fee | \$200.00 | | | | <input checked="" type="checkbox"/> | c) Search fee | \$500.00 | | | | TOTAL OF ABOVE CALCULATIONS = | | | \$1000.00 | | | | | | | | |
| <input checked="" type="checkbox"/> | a) Basic national fee | \$300.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TOTAL OF ABOVE CALCULATIONS = | | | \$1000.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Sheets | Extra sheets | Number of each additional 50 or fraction thereof (round up to a whole number) | RATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| - 100 = | /50 = | | x \$250.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th>RATE</th> <td colspan="2"></td> </tr> <tr> <td>Total claims</td> <td>21 - 20 =</td> <td>1</td> <td>x 50</td> <td colspan="2">\$ 50.00</td> </tr> <tr> <td>Independent claims</td> <td>4 - 3 =</td> <td>1</td> <td>x 200</td> <td colspan="2">\$ 200.00</td> </tr> <tr> <td colspan="4">MULTIPLE DEPENDENT CLAIM(s) (if applicable)</td> <td colspan="2">+</td> </tr> <tr> <td colspan="4">TOTAL OF ABOVE CALCULATIONS =</td> <td colspan="2">\$1250.00</td> </tr> </table> | | | | | | CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | | | Total claims | 21 - 20 = | 1 | x 50 | \$ 50.00 | | Independent claims | 4 - 3 = | 1 | x 200 | \$ 200.00 | | MULTIPLE DEPENDENT CLAIM(s) (if applicable) | | | | + | | TOTAL OF ABOVE CALCULATIONS = | | | | \$1250.00 | |
| CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total claims | 21 - 20 = | 1 | x 50 | \$ 50.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent claims | 4 - 3 = | 1 | x 200 | \$ 200.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MULTIPLE DEPENDENT CLAIM(s) (if applicable) | | | | + | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL OF ABOVE CALCULATIONS = | | | | \$1250.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL = \$1250.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL NATIONAL FEE = \$1250.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEES ENCLOSED = \$ 1250.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>Amount to be refunded:</td> <td>\$</td> </tr> <tr> <td>Amount to be charged:</td> <td>\$</td> </tr> </table> | | | | | | Amount to be refunded: | \$ | Amount to be charged: | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Amount to be refunded: | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Amount to be charged: | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>22-0261</u> in the amount of \$ <u>1250.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>22-0261</u> . A duplicate copy of this sheet is enclosed. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the International Application to pending status. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SEND ALL CORRESPONDENCE TO: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SIGNATURE:  Andrew C. Aitken | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CUSTOMER NUMBER: <u>36,729</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| REGISTRATION NUMBER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |